

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
COUNTYWIDE HOUSING, EMPLOYMENT AND EDUCATION RESOURCE DEVELOPMENT (CHEERD)
FEDERAL HOUSING SUBSIDIES UNIT (FHSU)

COMPARISON OF CITY AND COUNTY HOUSING SUBSIDY PROGRAMS

	HACoLA* Shelter Plus Care (SPC)	HACoLA Housing Choice Voucher Program (HCVP)	HACLA** Shelter Plus Care (SPC)	HACLA Homeless Section 8 (HS8)	HACLA Tenant Based Supportive Housing (TBSH)
Bedroom Limitations	Based on family size	Based on family size	Based on family size	Based on family size	Based on family size
Length of Supportive Service Commitment	For as long as client is a housing program participant	n/a	For as long as client is a housing program participant	1 year	For as long as client is a housing program participant
Service Match	Required	Not required	Required	Not required	Not required
Criminal Background Check	Not required	Required	Not required	Required	Required
Documentation of Legal Residency	Required	Required	Required	Required	Required
Verification of Chronic Homelessness Status	Verification letters from shelters & other facilities	Verification letters from shelters & other facilities	Verification forms from shelters	Verification forms from shelters	2 Verification forms
Qualifying Individual with Disability	Adult or Minor	Adult or Minor	Adult or Minor	Adult or Minor	Adult or Minor
Living Area	Can live in either HACoLA or HACLA jurisdiction (So. Cal Edison & DWP)	Within HACoLA jurisdiction (So. Cal Edison)	Can live in either HACoLA or HACLA jurisdiction (So. Cal Edison & DWP)	Within HACLA jurisdiction (DWP of City of L.A.)	Within HACLA jurisdiction (DWP of City of L.A.)
Income Limits	Annual income limited and based on number in household	Annual income limited and based on number in household	Annual income limited and based on number in household	Annual income limited and based on number in household	Annual income limited and based on number in household
Income Verification	Required	Required	Required	Required	Required
Bank Statement	Most recent month of checking or savings account statement required	Most recent month of checking or savings account statement required	Most recent month of checking and savings account required	Most recent month of checking and savings account required at the interview	Most recent month of checking and savings account required at the interview
Identification Documents (Copy)	Valid California ID/DL Social Security Card Birth certificate for minors only	Valid California ID/DL Social Security Card Birth certificate for minors only	Valid California ID/DL Social Security Card Birth certificate for minors only	Valid California ID/DL Social Security Card Birth certificate for minors only	Valid California ID/DL Social Security Card Birth certificate for minors only
Reporting Requirements	Quarterly Reports (required) Client Progress Report (required) Quarterly Home Visits (required)	n/a	Quarterly Reports (required) Quarterly Home Visits (required)	Quarterly Reports (required) Quarterly Home Visits (required)	Quarterly Reports (required) Quarterly Home Visits (required)
Prioritization through CES***	Required	Required	Required	Not a requirement at this time	Required

*HACoLA – Housing Authority of the County of Los Angeles

**HACLA – Housing Authority of the City of Los Angeles

***CES – Coordinated Entry System